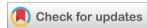


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(CASE REPORT)



# An Ayurvedic Management of Dadru with special reference to Tinea Cruris: A case study

Sachinkumar Sahebrao Patil \* and Radhika Balasaheb Ghumare

Department of Kayachikitsa M.A.M.'s Sumatibhai Shah Ayurved Mahavidyalaya, Malwadi, Hadapsar, Pune-411028, Maharashtra State, India.

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## **Abstract**

Tinea amongst all the skin disorders is the difficult to cure as it always has recurrence and also very obstinate. In regardless of quite excellent treatment options in modern medicine, it bubbles up again when medication stops. Tinea is fungal infection resembles with *Dadru* in *Ayurveda*. *Ayurveda* has given health solutions to mankind since the ancient time. Excessive severe itching and red patches are the common clinical manifestation which can be diagnosed by *Darshana* and *Prashana Pariksha.Raktamokshana* and *Shamana Chikitsa* will help to cure *Dadru*. Patient of *Dadru* presented with elevated irregular ring like patches with severe itching, redness/discolouration and burning sensation at the, groin region. Later it spreads over thigh, genital and buttocks region associated with sleeplessness, since 1 years. He has already taken modern medicine but there was recurrence. Patient treated with *Arogyavardhini Vati,Gandhak Rasayana Gomutra siddha Haritaki Panchtiktaghrita Guggulu* internally and *Marichyadi TailShirisha Twak*on OPD level and got relief.

Keywords: Dadru; Tinea; Ringworm; Raktamokshana; Shamana Chikitsa

## 1. Introduction

From head to toe, the skin is constantly working to prevent infection and disease in body by preventing viruses and microorganisms from entering. Thus, keeping skin healthy is important task. Still due to various conditions, skin disorders occur. Sometimes due to poor hygienic conditions, humid temperature, pollution and poor sanitization, infections on the skin may occur, it seems to be a concern as it may lead to psychological disturbances like anger, stress, depression and confidence often falls. And therefore, keeping your skin healthy has become a critical concern. In recent years, there has been a considerable increase in the incidence of skin problem in the tropical and developing countries like India [1]. All the skin diseases in Ayurveda have been classified under the broad heading of 'Kushta' which are further classified in to Mahakushta and Kshudrakushta. Dadru is one among the Kushta<sup>[2]</sup>. Acharya CharakaHas included Dadru in Khsudra Kushta, [3]. Dadru is caused due to involvement of Dosha like Kaph- Pitta. Kapha and Pitta Dosha gets vitiated and manifest in the skin and there cause the accumulation of toxins. These toxins further get accumulated in deeper tissues of skin like Rasa (nutrient plasma), Rakta, (blood), Mamsa (muscles) and Lasika (lymphatic). These toxins cause contamination of deeper tissues. Contamination of these deeper tissues and aggravation of kapha-Pitta Dosha leads to Dadrui.e., ringworm. Also, third Dosha Vata is considered to be involved. Thus, it is Tridoshaj disease, in which prime involved doshas are Kapha and Pitta. On the basis of presenting symptomatology most of the scholars have simulated Dadru with 'Tinea' through modern perspective. There are actually a variety of allopathic drugs, such as Antifungal and Anti Histaminic, used for the treatment of fungal infection. In such cases, however, recurrence is also seen. Here we managed a case of Dadru by Ayurvedic management.

<sup>\*</sup>Corresponding author: SachinkumarSahebrao Patil

## 2. Case Report

Present history: A 25 years old male patient visited to OPD with chief complaints of elevated irregular ring like patches with severe itching, redness/discolouration and burning sensation at the face, groin region. Later it spreads over thigh, genital and buttocks region associated with sleeplessness, severe itching since 1 years. He has already taken modern medicine but there was recurrence Patient had above complaints for 3 months. Patient already took oral and local antifungal modern medicines which got him relief from itching for time being but after quitting the medicine the patches reappeared with increased discolouration/redness. Then patient came to the OPD for *Ayurvedic* treatment.

Table 1 Personal history

Past medical history	No H/O DM, HTN fall of trauma No any surgical history.	
Personal history	Diet: Mixed, No addiction Sleep: Irregular Occupation: student	
Family history	Not Significant	
Drug History	No H/O Drug Allergy	

#### 2.1. On Examination

- Nadi /Pulse 68/min
- *Mala* (stool)- *Malayshtambha* (constipation)
- Mutra (urine)- Peetavarniya
- Jihva (tongue) Samata
- Kshudha (appetite)- Mandya
- Shabda (speech) Prakrut (normal)
- Sparsha (skin) Prakrut (normal)
- Akruti Madhyam
- Bala Madhyam Raktadab
- (B.P.)- 110/70mmHg
- Druk (eyes) Pita Varniya

#### 2.2. Local examination

- Site of lesion (Pidika Sthana) Groin thigh, genital and buttocks region
- Distribution (Vaypti) Asymmetrical
- Itching (kandu) Sever itching is present in both day and night.
- Inflammation (Raga) Moderate present

Table 2 Assessment Criteria

Sr. No.	Parameter	Grade 0	Grade 1	Grade 2	Grade 3	
1	Itching	Occasionally mild itching	Mild itching	Moderate itching	Severe itching	
2	Inflammation	Mild inflammation	Moderate inflammation	Severe inflammation	Severe inflammation with erythematous.	
3	Colour changes	Pink colour	Pinkish red colour	Red colour	Violence black colour.	
4	Nature of lesion	Mild visible lesions	Moderately visible	Prominent visible lesions	Prominently visible lesion with discharge.	

## 2.3. Treatment Plan

• Shodhana- Raktamokshana Karma-Raktamokshan should be done by using 18 No. bore needle early in the morning near about 60 ml blood should be withdrawn per sitting.

 Shamana Chikitsa-Pitta-KaphaghanaandKushthagna poly herbal, Herbo-minerals drugs should be used for external and internal uses.

# 3. Pathya Apathya

- Patient was advised to avoid oily, fried, spicy, junk, heavy food including curd, milk, and non-vegetarian diet.
- Maintenance of local hygiene by washing the parts twice a day, keeping it dry and wearing cotton and loose-fitting clothes. Patient was also advised to sleep without undergarments to avoid rubbing of the surface in groin.
- Day time sleep was advised to be avoided.
- Cow ghee was advised twice a day in the diet to pacify the *Rukshta*.

Table 3 Treatment

Sr. No.	Medicine	Dose	Anupan
1	Gandhak Rasayana	500mg BD	Koshnajala
2	Arogyavardhini Vati	250 mg TDS	Koshnajala
3	GomutraSiddha Haritaki	5gms HS	Koshnajala
4	Panchtiktaghrita Guggulu	500mg BD	Koshnajala
5	Marichyadi Tail	At night	
6	Shirisha Twak	Once in a day	Sheetjal

#### Observations

Observations were recorded before, on 15th day 30th day and 45th day on the above scale basis given in table:

Table 4 Before and After treatment

Sr. No.	Parameter	Before Treatment		A/T (Second follow up on 30th day)	A/T (Thrd follow up on 45th day)
1	Itching	3	2	1	0
2	Inflammation	3	2	2	0
3	Colour changes	3	3	2	0
4	Nature of lesion	2	2	1	0

# 4. Results and discussion

Most of the Acharayas has mentioned predominance of Pitta-Kapha Dosha in Dadru except Acharya Sushruta, who has considered Kapha predominance in Dadru. Rakta, Lasika and Ambu these are the Dushyas described in Ayurveda along with Raktavaha Srotasa Dushti. Shodhana and Shamana these are the two pillars of treatment for any disease including Dadru. In Ayurveda Shodhana Procedureand Shamana Chikitsa is recommended along with drugs having Kushtaghna, Krumighna and Kandughna properties, along with Bahiparimarjana Chikitsa (local application) in the form of Lepa and oil. In Ayurveda Shodhana Procedure and Shamana Chikitsa is recommended along with drugs having Kushtaghna, Krumighna and Kandughna properties, along with Bahiparimarjana Chikitsa (local application) in the form of Lepa and oil.

- *Gandhak Rasayana* [4]. It is a well-known, commonly used formulation mainly indicated in *KushthaRoga*. It acts as a blood purifier. It reduces *Kandu* and *Daha*. It is *Raktashodhak,Vranaropak, Twachya, Krumighna*
- Aarogyavardhini Vati [5]. It is extensively used in skin diseases. This mainly contains Kutaki with other herbomineral compounds like Triphala, Chitrak, Guggul, Nimb, Parad, Gandhak, Lauha Bhasma, Abhrak Bhasma,

Shilajit, Tamra Bhasma, are responsible for Lekhan, Bhedan of Dosha and Vatanuloman. Aarogyavardhini is a Kushthaghna formulation. But it also possesses actions like Pachana, Deepana, Malashodhana, Kshudha Pravartan. So, it is responsible for Agnideepan, Doshashaman, Kushthanashan and Shodhan up to some extent.

- GomutrasiddhaHaritaki is a Gomutrabhavit Haritaki formulation described in all Brihattrayi. Haritaki has Kashaya, Ruksha, Ushna, Anulomana properties and Gomutra has Katu, Tikshna, Ushna, Kshara properties. Due to these properties, they help in relieving obstruction in Srotas. It enhances Agni by Agnideepana property and causes Virechana<sup>[6]</sup>
- Panchtiktaghrita Guggulu is mentioned in Bhaishajya Ratnavaliin Kushthrogadhikar. It is Tikta Rasa Paradhan, acts as RaktadoshaPachaka and later Rakta Prasadak. Purana Guggulu is said to be Lekhana in nature. Here Guggulu acts as a vehicle for these drugs which enters into Sukshma channels. Gives instant relief in Kandu PradhanLakshanas<sup>[7]</sup>
- *MarichyadiTail* [8] is *Raktashodhak, Vranropaka, Twachya*, useful in skin diseases [9]

The drug *Shirishalepa* mentioned in *Charaka Samhitha* [10]. It is having *Kashaya* (astringent), *Tikta* bitter), *Madhurarasa* (sweet taste), *Laghu* (light to digest), *Ruksha* (rough), *Tikshnaguna* (sharp) and also having properties like *Thridoshahara* (pacifies three humors), *Varnya* (gives good complexion), *Vishagna* (anti-toxic), *Vranaropana* (wound healing) and *Kushtagna* (pacifies skin diseases). [11.12]

The affected part will be thoroughly washed and dried. Then prepared Lepa was applied over the lesion. The thickness of the Lepa should be 1/3 of *Anguli*(1*Anguli*-1.905cm). The number of times of application per day will be once in a day. Each application will be kept until it would dry up. Once the *Lepa* got dried moist it by sprinkling water and then remove it with clean cotton.

## 5. Conclusion

*Ayurvedic* is a medical science which gives permanent cure by using the internal medicine and external medicine. The results suggested that *Ayurvedic* treatment showed significant result in *DadruVyadhi* by reducing *Kandu*, colour of *Mandala*, number of *Pidika*, number of *Mandala* variables and the efficacy of the treatment was highly significant even during follow up. In this case study patient completed the full course of treatment without any adverse reaction to drug.

## Compliance with ethical standards

# Acknowledgments

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Disclosure of conflict of interest

This work is not published anywhere. The authors declare no conflict of interest.

Statement of informed consent

Informed consent was obtained from individual participant included in the study.

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